FLIGHT SURGEON/AEROMEDICAL PHYSICIAN ASSISTANT NON-CLINCAL AVIATION MEDICINE PROGRAM TRAINING SUPPORT MATRIX (Active Component)

	REQUIRED INTERVALS							X* Conduct during semi-annual AAPS		
No.	Action	Status	In-process	Annual	Semi- Annual	Quarterly	Monthly	Daily	As Needed	Remarks
	Established an Aviation Medicine Standing		-							Review Annually, The SOP may, where applicable, be consolidated at the battalion/squadron or
1	Operating Procedures (SOP)		Х	Х	X*					regiment/brigade/group level.
2	Valid Fight Status Orders- FS-Aviation Career Incentive Pay(ACIP), APA- Hazardous Duty Incentive Pay(HDIP)		Х		Х*					
3	Flight Surgeon- Minimum Flying Hours-Active Duty			48 Hours	24 Hours		4 Hours			Bank Time-Go back up to 5 months for excess hours and go 3 months forward to make up time.
4	Flight Surgeon- Night Min.Flying Hours-Active Duty			10 Hours	N/A					
5	Aeromedical Physician Assistant-Minimum Flying Hours-Active Duty				Х*		4 Hours			Bank Time-Go back up to 5 months for excess hours and go 3 months forward to make up time.
6	FS/APA Reading Card File		Х		Χ*	Х			Х	FS/APAs will read and remain familiar with these files.
7	Inspect Individual Flight Record Folders (or ATS Controller Records) to ensure record contain the required DA Form 4186				Х*					AAPS Requirement
8	Inspect individual Flight Records to ensure records contain applicable medical waiver approval letters				Х*					AAPS Requirement
9	FDME/FDHS Tracking				X*		Х			Via AERO.
10	Medical Portion of the Pre-Accident Plan		X	x	X*	X				systematic review to be conducted at least quarterly, exercise requiring all elements to physically respond must be conducted at least annually
	model i stati o allo i se residenti alli			_ X		Χ				Take part in aviation safety meetings, Councils will convene a minimum of quarterly regardless of unit status or
11	FS/APA Safety & Standardize Council/Meetings				Х*	X				location.
12	Unit Level Training and Aviation Safety (SAFETY STAND DOWN)				Х*	X				Conduct aeromedical briefings held for both officer and enlisted personnel at unit-level training or aviation safety meetings. ARMS Guide (Techniques) Aviation
13	Aviation Accident Prevention Surveys (AAPS), Ensure that Aviation Medicine was surveyed and documented at least semi-annually (Active Component) in each of the last five years.				х					Medicine Checklist are acceptable forms of documentation of pervious AAPS for the functional area of Aviation Medicine.
14	Unit Hazards Tracking Log.				X*				Х	Hazards found during the AAPS will be tracked through the unit hazard tracking system.
15	Assist the unit Aircrew Life Support Equipment shop. (ALSE)				Х*	X				Quarterly visits to monitor the ALSE program, with at least a semi-annual inspections as part of AAPS.
16	Aeromedical Training Program (altitude physiology, spatial disorientation (SD), aviation protective equipment, stress, fatigue and exogenous factors).			x	X*					The POI must be conducted once a year.
16	Mission Analysis to determine special aeromedical									
17	training requirements MOS 68W TC 8-800 Medical Education and			Х	X*				X	The POI must be conducted once a year.
18	Demonstration of Individual Competence (MEDIC) MOS 68W recertifying in accordance with National			Х	Х*					
19	Registry of Emergency Medical Technicians			X	Х*					
	AIR AMBULANCE COMPANY/DETACHMENT Air medical crews of air ambulance units accurately									
20	reported on the Unit Status Report (USR) (MEDEVAC only) Established, in writing, a set of local medical				Х*	Х				Verifiy Quarterly Training Brief/Unit Status Report (USR)
21	treatment protocols for air ambulance personnel (Flight Medics) (MEDEVAC only)		Х	Х	Х*					Once established review annually.
22	Provide and participate in the medical training air ambulance personnel (MEDEVAC only)				Х*		Х			Once a month during SGT Time Training.
23	Review reports of medical evacuations (run sheets) for appropriateness of the mission and care given (MEDEVAC only)				Х*			Х	Х	
24	Airworthiness releases for all medical equipment taken aboard medical evacuation aircraft (MEDEVAC only)				Х*					
25	MES for air ambulance operations accurately reported on the Unit Status Report (MEDEVAC only)				Х*	Х				Verifiy Quarterly Training Brief/Unit Status Report (USR)
26	MES AA (SKOT) shortages identified and on a valid requisition (MEDEVAC only)			Х	Х*		Х		Х	Inventory 10% monthly, 100% annually, and replaceitems as needed

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